

MULTIPLE DEFENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PT0-470)

SERIAL NO.  
10/20/84  
APPLICANT

FILING DATE

CLAIMS

	AS FILED		AFTER 1st DEFENDENT		AFTER 2nd DEFENDENT	
	NO.	DEF.	NO.	DEF.	NO.	DEF.
1			1			
2				1		
3				1		
4				1		
5				1		
6				1		
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44				1		
45				1		
46				1		
47				1		
48				1		
49				1		
50				1		
TOTAL NO.			5			
TOTAL DEF.			5			
TOTAL						

	NO.	DEF.	NO.	DEF.	NO.	DEF.
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TOTAL NO.						
TOTAL DEF.						
TOTAL						

BEST AVAILABLE COPY